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21788

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 14

Application Number	09/754,411
Filing Date	January 2, 2001
First Named Inventor	Eric D. BERGMAN et al.
Group Art Unit	2178
Examiner Name	Cong Lac T. Huynh
Attorney Docket Number	30014200-1072

ENCLOSURES (check all that apply)

Transmitted herewith is an Amendment in response to the Office Action mailed October 18, 2006.

The fee has been calculated as shown below:

(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	21	-	27	0	<input type="checkbox"/> x \$25.00 <input checked="" type="checkbox"/> x \$50.00	\$0.00
INDEPENDENT CLAIMS	3	-	3	0	<input type="checkbox"/> x \$100.00 <input checked="" type="checkbox"/> x \$200.00	\$0.00
	APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR.			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> x \$180.00 <input checked="" type="checkbox"/> x \$360.00 ONE TIME	\$0.00
					TOTAL ADDITIONAL FEE FOR THIS AMENDMENT	\$0.00

Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated October 18, 2006 by two month(s) for a fee of \$450.00 so that the period for response is extended to March 18, 2007 under 37 C.F.R. § 1.136.

The amount of \$_____ for the Terminal Disclaimer under 37 C.F.R. § 1.20(d) is included in the enclosed credit card payment form to charge.

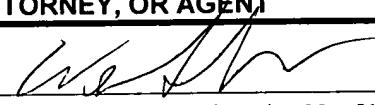
The enclosed credit card payment form to charge the amount of \$450.00 is to cover the total claim fee and other applicable fees.

The Commissioner is hereby authorized to charge the extension fee and any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

14. Customer No. 58328

Dated: March 19, 2007


A. Wesley Ferrebee (Registration No. 51,312)

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